

HEALTH CARE REFORM FOR WOMEN

Prior to the passage of the Affordable Care Act, women were disproportionately and negatively affected by the U.S. health care system. Women could be denied coverage because of pre-existing conditions and forced to pay higher premiums and more out-of-pocket costs for health insurance than men. In many cases, health insurance did not cover basic women's health services such as mammograms or pre-natal visits. The Affordable Care Act addresses these discriminatory practices, and enacts positive reforms that help women get the health care that they need.

What health care reform means for women:

Lower costs for women

- Prior to health insurance reform, American women paid more out-of-pocket for health care than men. Now, new plans will include a cap on the amount that an insurance company can require a woman to pay out-of-pocket, including co-pays and deductibles.
- Women have traditionally paid higher premiums than men because insurance companies were allowed to charge women more than men for the same insurance plan. A healthy 22-year-old woman, for example, could be charged premiums 150 percent higher than her male counterpart. Under the Affordable Care Act, insurance companies are prohibited from discriminating based on gender, age or health status.

More Choices for Women

- Before the Affordable Care Act, a woman could be denied coverage simply because of a pre-existing condition. Such conditions included a previous pregnancy, a Cesarean, or being the victim of domestic violence. The Affordable Care Act prohibits insurance companies from denying a woman coverage because of a pre-existing condition, from excluding coverage of that condition, and from charging more because of her health status and/or gender.
- Prior to the Affordable Care Act less than 50 percent of American women had the option to obtain health insurance through their jobs. Through the creation of Health Insurance Exchanges, health care reform guarantees that women have quality, affordable health insurance if they lose their jobs, change jobs, move, or get sick. State-based health insurance Exchanges will provide women with accurate information to compare prices and benefits and decide which health insurance option is right for themselves and their families.

Greater Access to High-Quality Health Care and Affordable Preventative and Wellness Care

- The Affordable Care Act requires all insurance plans to cover women's preventative care and health screenings at no additional cost to women. It expands access to annual mammograms for women under age 50, cervical cancer screenings, pregnancy and postpartum depression screenings, screenings for domestic violence, annual women's health screenings, and family planning services.
- The new system of Exchanges will ensure coverage of prevention and basic health services, including maternity benefits, which are rarely provided in health plans in the current individual insurance market.
- Health Care Reform also establishes a national education campaign dedicated to increasing young women's awareness and knowledge of breast health and breast cancer, and calls for further research on the prevention of breast cancer in young women.
- The Act establishes a Pregnancy Assistance Fund for grants to assist pregnant and parenting teens and women. The Fund allows Medicaid coverage for counseling and pharmacotherapy for pregnant women who use tobacco.

To learn about how the Affordable Care Act will affect you and your family and the health insurance options available to you in Vermont visit Leahy.Senate.gov and HealthCare.gov